PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1996

Application or Docket Number

785455

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | | SMALL | ENTITY | , OB, | OTHER THAN OR SMALL ENTITY | |
|---|--|-----------------------------|-----------------------------------|--------------------|-----------|---------------------------------------|--|-------------|----------------|-------------------------|----------|----------------------------|------------------------|
| FOR | | | NUMBER FILED | | | NUMBER EXTRA | | | RATE | FEE | 1 | RATE | FEE |
| | | | | | | | | | nu ni Asinying | कार्य व्यवस्थातिक केन | 二、体理业 | DAIE. | ree |
| BASIC FEE | | | | | | | | | | 385.00 | OR | | 770.00 |
| TOTAL CLAIMS | | | 2 | minus 20 = | | * 1 | | . | x\$11= | | OR | x\$22= | 154 |
| | PENDENT CLA | | 9 | | us 3 = | • 6 | | | x40= | | OR | x80= | 480 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | | +130= | | OR | +260= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | <u>.</u> 47 | TOTAL | | | TOTAL | 1404 |
| | | | | | S. J. A | | CA SHOWN | OR | Manual I | | | | |
| | | | MS AS AMENDED - PAR Imn 1) (Co | | | RT II olumn 2) | | | | SMALL ENTITY | | | R THAN ENTITY |
| | | CLA | IMS | S | | IGHEST | (Columno) | Ιг | SWALL | | ^-OR | F | · · · · · |
| AMENDMENT A | | AFT | INING TER DMENT | | NI PRE | UMBER EVIOUSLY AID FOR | PRESENT EXTRA | - | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | 5 | 5 | Minus | | 27 | = /5 | W. | x\$11=x | 44 | OR | x\$22= | |
| | Independent | 2 | 2 | Minus | *** | 9 | =/3.1 | | ∡40=, | 1 | OR. | ;x80= | |
| 4 | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +130≡ | | ÓR | +260= | FRENZE T |
| * 1.3. | r Harton Karan | (Colon | • | | | | TOTAL | 1763400 | OR | ्रिलेTOTAL ODIT. FEE | | | |
| · . | | (Colur CLA | | | <u> </u> | olumn 2) GHEST | (Column 3) 👸 | | | 有人的意思 | | | Age 5. Frage V |
| ENT B | | REMA AFT AMEND | INING ER | | NL PRE | UMBER VIOUSLY VID FOR | PRESENT EXTRA | 1 | RATE | ADDI- TIONAL FEE | 1 | RATE | ADDI- TIONAL FEE |
| AMENDMENT | Total | * | | Minus | ** | | - 1. 1. 1. 1 - 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | P*: | x\$11= | *********** | OR | x\$22= | *** |
| ME | Independent | * | | Minus | *** | , | = | | x40= | 12 | OR | x80= | |
| ٨ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +130= | * 1 | OR | +260= | 10 m |
| | , | mn 1) | | TOTAL DDIT. FEE | | OR , | TOTAL ADDIT. FEE | | | | | | |
| AMENDMENT C | | CLA REMA AFT AMENE | INING ER | | NL PRE | GHEST UMBER EVIOUSLY AID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | | Minus | ** | | = | | x\$11= | | OR | x\$22= | |
| | Independent | * | | Minus | *** | | = | | x40= | | OR | x80= | |
| _ | FIRST PRES | SENTAT | ION OF | MULTIPLE | DEPE | | +130= | | OR | +260= | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |